# terim Report of the Medical Officer of Health for the year 1944.

I'r. Chairman and Gentlemen,

I beg to submit the following report in respect of the year 1944. As in previous years since the commencement of the present hostilities the report has again been confined to the detail of vital statistics and to an account of the principal infectious diseases.

The extracts from the district's vital statistics herein quoted are based on the figures as supplied by the Registrar General, i.e. figures for the precise calendar year adjusted for inward and outward transfers and excluding deaths and notifications of non-civilians. The statistics are calculated upon the estimated population figure of 32,990, as supplied by the Registrar General.

ITAL STATISTICS		.,				
LIVE BIRTHS	Total	Males	Fema les			
Legitimate	641 37	349 22	292 15			
Total	678	371	307			
Birth rate per 1,000 of estimate	ed popula	tion:- 20.5				
STILL BIRCHS	Total	Males	Females			
Legitimate	19 2	12 -	7 2			
Total	21	12	9			
Rate per 1,000 (Live and Still)	births:-	30.0				
<u>DEATHS</u>	Total	Males	Females			
	461	245	216			
Death rate per 1,000 of estimat	ed popula	tion:- 13.9				
DIATES FROM PURREERAL CAUSES						
(a) from Puerperal Sepsis						
Puerperal Death Rate per 1,000	births	•				
(a) from Puerperal Sepsis						
DEATH RACE OF LUFANCE UNDER ONE	MEAR OF	ACFI				
All infants per 1,000 live birt Legitimate infants per 1,000 le Illegitimate infants per 1,000	gitimate	births	52.4			
Deaths from Cancer (all ages)  Measles (all ages)  Mhooping Gough (all Diarrhoea (under 2) Road Traffic Accide	ages) . years) .		54 1 1 4 5			

12

other Violent Causes

### INFECTIOUS DISHASING

The following table shows the incidence of the various infectious diseases notified during the year:-

<u>D<b>is</b>ease</u>	Total cases notified.	Cases ad- mitted to hospital.	Total Deaths.
Cerebro Spinal Meningitis	4	4	_
Diphtheria	29	27	1
Dysentery	-		-
Encephalitis Lethargica	1		3
Enteric Fever	1	1	-
Erysipelas	10	<b></b>	
l'easles	22	<b>-</b>	1
Cphthalmia Neonatorum	3	-	
Fneumonia	24	- %	18
Puerperal Tyrexia	-	-	-
Scarlet Fever	75	69	
Smallpox	<b>-</b> ,	-	-
Whooping Cough	19	•••	1

Of the three deaths from Encephalitis Lethargica, two of the persons had not been notified as suffering from the disease prior to their decease.

# TUBERCULOSIS

The incidence of new cases of and deaths from Puberculosis during the year are shown in the following tables.

New Cases Notified.

TABLE "B"
Deaths from Tuberculosis

Age	Fulmonary		Non-rul		
Groups	r.	F.	17.	F.	
0- 1- 5- 15- 25- 35- 45- 55- 65 and over	- 1 5 7 3 1 1	12 4 - 1 3	15811111	- 1 7 3 1 - -	
Total	18	20	11	12	

I	аде	Fulm	onary	Non-Ful		
	Groups	11.	F.	M.	F.	
	0- 1- 5- 15- 25- 35- 45- 55- 65 and	- - 1 2 2 1	- 5 1 2 1	- 1 - - 1	1	
	Total	7	10	2	3	

Of the deaths which occurred during the year, the following numbers occurred among persons who, prior to their decease, had not been notified as suffering from this disease, viz:-

Five sufferers from Pulmonary and one from Non-Pulmonary Tuberculosis.

#### SPECIAL HEALTH SERVICES

# (a) Immunisation against Diphtheria.

During the year under review 284 children received a full course of treatment; making the total of full course treatments since the commencement of the campaign in 1941, 4,676. I estimate that 50.5% of the district's children aged 1 to 5 years, and 51.5% of those aged 5 to 15 years, have now received a full course of immunisation treatment.

Of the 29 cases of Diphtheria notified during the year, four occurred in persons who had previously had a full course of immunisation treatment.

## (b) Treatment of Scabies.

By action under the provisions of the Scabies Order, 1941, a total of 433 patients from this district and 71 from Barnard Castle Rural District were treated during the year.

### SUM ARY

The Vital Statistics above quoted compare favourably with those of recent years, as shown in the following table, viz:-

	Death Rate.	Birth Rate.	Infant Mortality Rate	New	dubercu cases N.P.	losis Deaths
For 1944	13.9	20.5	62.9	38	23	22
For 1939-43 (average)	13.5	17.3	66.7	27	23	17
England & Wales, 1944	11.6	17.6	46.0			

According to the estimate of the Registrar General the population has steadily decreased during recent years. This has been largely due to a lower birth rate. The birth rate, however, has shown a tendency to rise during the past two years. The district's death rate is high compared with that of the country as a whole, but in making this comparison it must be noted that, with a rapidly decreasing birth rate until recently, our district population has comprised a bigger proportion of older people than formerly. This fact has been fully illustrated by reviews of the monthly death returns, in which the proportion of deaths in aged persons has of recent years been markedly higher than in previous years.

The incidence of and mortality from the infectious diseases have during 1944 remained gratifyingly low. The exception is in the evidence of tubercular diseases. Of recent years the incidence of this disease, essentially an infection of the younger people, has apparently increased steadily, especially among young females. It is difficult to assess the true extent and the true cause of this apparent increase. Improvement in diagnosis may to some extent have led to an increase in notifications of tuberculosis, and the fuller absorption of young women in our industries may have had some influence on their general health. Overcrowding is an acknowledged predisposition to tuberculosis, and while overcrowding does exist to a considerable extent in many of the dwellings of this area, this factor in itself will not account for increased incidence of the disease as during the war, and immediately prior to it, the overcrowding has not been aggravated - the estimated population in 1944 was 2,300 less than in 1939 - nor can poverty and malnutrition be looked to as an explanation, for there is more money among the district's population to-day and fuller employment for young people including young women than in pre-war days. Full employment entails good health, and it may be agreed that a community enjoying full employment must of necessity come under fuller medical supervision and attention than a community resident in an area of industrial depression, for absenteeism from work calls for medical examination and diagnosis. This fact may suggest that the apparent increase in tubercular diseases of our young people is only a false one; but the fact remains that, despite improved sanitation, despite improved education in personal and community hygiene, and despite successful efforts to reduce the incidence of other infectious diseases, tuberculosis remains among us as a serious menace to the welfare of our young people. One is therefore tempted to ask whether the young people are availing them-selves to the full of these improved social conditions. Are they, for example, making the best use of their leisure and practicing

personal hygiene? In this connection I have been much impressed during war years by noting, in medically examining unselected male employees in Civil Defence Services, the untoward effect of excessive cigarette smoking. The war years have brought, along with fuller employment to all classes of the civil population, a greatly increased consumption of tobacco and alcohol among the young women and youths. Having noted that Chronic Bronchitis, deficient chest expansion, and markedly increased pulse rates are frequently found in adult males who confess to habitual and heavy inhalation of cigarette smoke, I feel justified in predicting that a continuation of the present day high consumption of tobacco will have a harnful effect on the health of our young men and women in the near future. The popularisation of healthy open-air recreation among young people would appear to be the obvious way of preventing this.

I am,

Mr. Chairman and Gentlemen,
Your obedient servant,
H.G. DONALD,

17th. July, 1945.

Medical Officer of Health.